FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

ОМВ	APPROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera hours per resp	ge burden oonse16.00
SEC	USE ONLY
Prefix	Serial
DATE	E RECEIVED

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	1/17/17/			
Convertible Note and Warrant Financing	11 10 10 5			
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐	Section 4(6) ULOE			
Type of Filing: ☐ Amendment				
A. BASIC IDENTIFICATION DATA	PROCESSED)			
Enter the information requested about the issuer.	4			
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sychron, Inc.	AUG 17 2004			
	Telephone Number (Includifination de)			
(if different from Executive Offices)	Telephone Number (Including Area Code) Same as above			
Brief Description of Business Enterprise Application Resource Control to Linux and Windows Servers				
Type of Business Organization				
☐ corporation ☐ limited partnership, already formed ☐ other (p	please specify);			
☐ business trust ☐ limited partnership, to be formed	8 6			
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Sychron, Inc.				

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02) Persons who respond to the collection of information contained in this form are not required to respond unless the form display a currently valid OMB control number.

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	A. BASIC IDENTIFICAT	ION DATA (CONTINUE)	D)	
Enter the information requested for the Each'promoter of the issuer, if the issue Each beneficial owner having the powe Each executive officer and director of o Each general and managing partner of	following: er has been organized within the per to vote or dispose, or direct the corporate issuers and of corporate	past five years; vote or disposition of, 10% or r	more of a class of eq	•
Check Box(es) that Apply:	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Merifield Investments LLC			÷	
Business or Residence Address (Number and 550 Kearney Street, Suite 515, San Francis)		
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Cardel International, Inc., Panama		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Business or Residence Address (Number and c/o Maitre Laurent Strawson Etude Straw			alo 1211 Comovo	6 Switzerland
Check Box(es) that Apply: Promoter	Son Montavon & Mermier, Beneficial Owner	Executive Officer	Director	General and/or
Tromoter	M Delicited Owner			Managing Partner
Full Name (Last name first, if individual) Jonathan Hill		•		
Business or Residence Address (Number and c/o 1900 South Norfolk Street, Suite 260, S			_	
Check Box(es) that Apply: Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual) Leslie Valiant				
Business or Residence Address (Number and)		
c/o 1900 South Norfolk Street, Suite 260, S Check Box(es) that Apply: Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				wanaging raitie
Business or Residence Address (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code			
Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Number and	Street, City, State, Zip Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	OCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt	\$	\$
	Equity	\$ 666,666.66	\$ 666,666.66
	☐ Common ☐ Preferred	\$	\$
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests.	\$	\$
	Other (Specify)	\$	\$
	Total	\$ 666,666.66	\$ 666,666.66
	Answer also in Appendix, Column 3, if filing under ULOE.	3 000,000.00	\$ 000,000.00
	and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchase
	Accredited Investors	3	\$ 666,666.66
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sol by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities i this offering. Exclude amounts relating solely to organization expenses of the insurer. The information mabe given as subject to future contingencies. If the amount of an expenditure is not known, furnish a estimate and check the box to the left of the estimate.	y	
	Transfer Agent's Fees		\$
	Printing and Engraving Costs	ā	\$
	Legal Fees	⊠	\$ 4,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	— ⊠	\$ 662,666.66

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Γ	:	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 pr	resently subject to any of the disqualification provisions of such rule?	Yes	No ⊠	
		See Appendix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required	to furnish to any state administrator of any state in which this notice is by state law.	s filed a notice	on Form D	
3.	The undersigned issuer hereby undertakes offerees.	to furnish to the state administrators, upon written request, information	furnished by the	he issuer to	
4.		issuer is familiar with the conditions that must be satisfied to be entitl which this notice is filed and understands that the issuer claiming the auditions have been satisfied.			
	e issuer has read this notification and knows t y authorized person.	he contents to be true and has duly caused this notice to be signed on its	s behalf by the t	undersigned	
	uer (Print or Type) chron, Inc.	Signature PMcColl	7/28/6	ref	
	me of Signer (Print or Type) illiam F. McColl	Title or Signer (Print or Type) President and Chief Executive Officer			

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

		4							
1	2 3			4					5
	Intend to sell to non-accredited investors in State (Part B-Item 1)		sell to dited Type of security and s in aggregate offering price offered in state	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
NH	 	1.0				1000000		1	
NJ	 							 	
NM	 								
NY	 								
NC									
ND	 								
ОН									
OK	 					+			
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